



GENERAL NOTICE – EMERGENCY MEDICAL SERVICES

Subject: Revised Minimum Standards for Rhode Island-Licensed Ambulances

Notice #: 006 **Issued:** 5/19/2010 **Revised:** 6/25/2010 **Effective:** 11/1/2010

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Updated *RI Prehospital Care Protocols & Standing Orders* were recently promulgated which impact the minimum standards for Rhode Island ambulances. The current *RI Ambulance Licensure & Inspection Manual* is currently under revision to reflect these and other changes. In the interim, the following information may be used as a guide for ambulances services preparing to comply with the updated protocols. These changes are effective November 1, 2010 (or upon early adoption of the protocols, for those services electing to do so.)

REVISED 5/25/2010 to include minimum quantities for medications.

REVISED 6/25/2010 to include Nitroglycerin paste, permit Calcium Chloride for all ALS vehicles, and revise minimum quantity for Furosemide.

EQUIPMENT CHANGES

- An **Automatic External Defibrillator (AED)** is now required on all vehicles except class A-1 and C-1.
- For vehicles having an IV Infusion Pump, **PVC-free tubing** is now optional (though recommended.)
- An **Intraosseous Infusion (IO) Device** is now optional for any ALS vehicle (classes A-1, A-1A, C-1, and C-1A.) The device is no longer restricted to Paramedic-equipped vehicles only.
- A **Mucosal Atomization Device (MAD)** is now optional on all vehicles for intranasal (IN) administration of naloxone (Narcan®) or midazolam (Versed®) [ALS vehicles only].

MEDICATION CHANGES

- The following **Medications** are now permitted or required as indicated:

Medication	Form/Quantity	A1	A1A	A2	C1	C1A	C2
Calcium Chloride	min. 2 g (injectable vial/s)	○ [1]	○ [1]	-	○ [1]	○ [1]	-
Diltiazem (Cardizem®)	min. 50 mg (injectable vial/s)	○ [1]	○ [1]	-	○ [1]	○ [1]	-
Fentanyl	min. 100 mcg (inj. vial/s)	○ [2]	○ [2]	-	○ [2]	○ [2]	-
Furosemide (Lasix®)	min. 80 mg (inj. vial/s)	✓	✓	-	✓	✓	-
Ipratropium (Atrovent®)	min. 1x 2.5cc vial	○	○	○	○	○	○
Lorazepam (Ativan®)	min. 20 mg (injectable vial/s)	○	○	-	○	○	-
Naloxone (Narcan®)	min. 10 mg (injectable vial/s)	✓	✓	○	✓	✓	○
Nitroglycerin paste	min. 1 gm (w/applicator)	○	○	-	○	○	-
Diazepam (Valium®)	min. 20 mg (injectable vial/s)	○	○	-	○	○	-

✓ = REQUIRED ○ = OPTIONAL - = NOT PERMITTED

[1] Required for Paramedic vehicles, optional for other ALS vehicles

[2] Restricted to Paramedic vehicles only

- The following **Admixture Medications** are now permitted on ALS vehicles without an IV Infusion Pump: Dopamine, Epinephrine, and Lidocaine. All other admixtures require an IV Infusion Pump.
- **Syrup of Ipecac** has been removed from the protocols and may not be carried on any ambulance.

Thank you for your attention in this matter. Should you have any questions related to the ambulance inspection process, please contact the Division of EMS at (401) 222-2401 or email Marisa Saccoccio, EMS Field Technician, marisa.saccoccio@health.ri.gov.

Authorizing Signature: _____

Date: 6/25/2010